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CONFIRMATION NO. 7333

Bib Data Sheet

SERIAL NUMBER 10/815,092	FILING OR 371(c) DATE 03/31/2004 RULE	CLASS 726	GROUP ART UNIT 2134	ATTORNEY DOCKET NO. 065426.0002
APPLICANTS Andrea M. Jacobson, St. Paul, MN;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 06/10/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY MN	SHEETS DRAWING 51	TOTAL CLAIMS 1
INDEPENDENT CLAIMS 1				
ADDRESS 50717				
TITLE NETWORK POLICY MANAGEMENT AND EFFECTIVENESS SYSTEM				
FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	